

Retirees Under age 65 after 7/1/04

	2023 Full Monthly Premium	Bentley Monthly Contribution	Your Monthly Contribution
HMO Plan - Medical			
Employee	\$872.45	\$133.14	\$739.31
Employee + Child(ren)	\$1,919.40	\$514.87	\$1,404.53
Employee + Spouse/Domestic Partner	\$2,486.47	\$514.87	\$1,971.60
Employee + Family	\$2,617.34	\$514.87	\$2,102.47
Best Buy HMO - Medical			
Employee	\$695.07	\$133.14	\$561.93
Employee + Child(ren)	\$1,529.14	\$514.86	\$1,014.28
Employee + Spouse/Domestic Partner	\$1,980.93	\$514.86	\$1,466.07
Employee + Family	\$2,085.21	\$514.86	\$1,570.35
High Deductible Plan - Medical			
Employee	\$638.94	\$133.14	\$505.80
Employee + Child(ren)	\$1,405.67	\$514.86	\$890.81
Employee + Spouse/Domestic Partner	\$1,820.98	\$514.86	\$1,306.12
Employee + Family	\$1,916.84	\$514.86	\$1,401.98
Standard Plan - Dental			
Employee	\$50.18	\$0.00	\$50.18
Employee + Child(ren)	\$110.40	\$0.00	\$110.40
Employee + Spouse/Domestic Partner	\$143.00	\$0.00	\$143.00
Employee + Family	\$150.53	\$0.00	\$150.53
High Plan - Dental			
Employee	\$55.61	\$0.00	\$55.61
Employee + Child(ren)	\$122.36	\$0.00	\$122.36
Employee + Spouse/Domestic Partner	\$158.51	\$0.00	\$158.51
Employee + Family	\$166.85	\$0.00	\$166.85
Eyemed Vision			
Employee	\$5.34	\$0.00	\$5.34
Employee + Child(ren)	\$11.73	\$0.00	\$11.73
Employee + Spouse/Domestic Partner	\$15.20	\$0.00	\$15.20
Employee + Family	\$16.01	\$0.00	\$16.01